



Diagnostic Soil Sample Information

—for problem samples only—

— please provide all information requested in a legible manner —

*Soil samples from areas where growth problems exist receive priority in the lab.
Use of this form will not expedite processing of routine samples.*

SAMPLING & SHIPPING

- Comparative soil samples (from areas of "good" growth vs. "bad") are most effective for problem diagnosis. Sample in the root zone: 6–8 inches deep in cultivated areas and 4 inches in undisturbed areas.
- Use clean, plastic buckets and stainless steel tools. Galvanized tools can contaminate samples with zinc.
- Choose sample IDs that are meaningful to you. Label each sample box, and fill out this form completely.
- Package samples properly, and **DO NOT ship problem samples with routine samples.**
- Label **top and sides** of the shipping box with the words "**PROBLEM SAMPLES.**"
- Address package to **NCDA&CS Agronomic Division, Soil Testing** appropriately, as follows:
for shipment via U.S. Mail, use **1040 Mail Service Center, Raleigh NC 27699-1040** or
for shipment via private carrier, use **4300 Reedy Creek Road, Raleigh NC 27607-6465.**
- For more information, visit our Web site: www.ncagr.com/agronomi/

GROWER INFORMATION — Please Print

CONSULTANT or OTHER ADVISOR

LAST NAME		FIRST NAME	PHONE	LAST NAME		FIRST NAME
ADDRESS				ADDRESS		
CITY		STATE	ZIP CODE	CITY		STATE ZIP CODE
COUNTY (where samples were taken)	TOTAL # SAMPLES	FARM ID	PHONE		COPY OF REPORT Yes <input type="checkbox"/> No <input type="checkbox"/>	
E-mail			E-mail			

FIELD INFORMATION

LAB NUMBER (leave blank)	SOIL SAMPLE ID	SAMPLE DEPTH (inches)	CORRESPONDING SAMPLE IDS		CROP CONDITION (check one)			DROUGHT STRESS (check one)	
			PLANT TISSUE	NEMATODE ASSAY	POOR	FAIR	GOOD	YES	NO
1									
2									
3									
4									
5									
6									

LIME applied within the past 12 months: Tons/acre _____ Year _____ Month _____

PROBLEM CROP _____ NEXT CROP _____

Date of planting/transplanting _____ Was the previous crop affected? _____ Yes _____ No

Did you submit corresponding samples to the NCSU Plant Disease and Insect Clinic? _____

(Please complete other side of sheet)

Additional Information Concerning the Problem

If signs or symptoms of insects or diseases are present, contact your Cooperative Extension office for information about collecting, preparing and shipping plant and insect specimens to the PLANT DISEASE & INSECT CLINIC, 100 Derieux Place, 1227 Gardner Hall, Campus Box 7211, North Carolina State University, Raleigh, NC 27695-7211. Phone 919-515-3619 about disease problems and 919-515-9530 about insect-related problems.

VISUAL SYMPTOMS of ABNORMAL PLANTS

Growth

General: Good _____ Fair _____ Poor _____ Dead _____

Specific: Brittle leaves/stems _____ Distorted leaves _____ Leaf rosette _____ Dwarfed _____

Roots: Good _____ Fair _____ Poor _____ Dead _____ If legumes, nodulated? Yes _____ No _____

Bud / New Growth: Good _____ Fair _____ Dead _____ Distorted _____

Color

Color Location: Younger leaves _____ Older leaves _____ Whole plant _____

Color of Leaves: Dark green _____ Light green _____ Yellow _____ Red _____ Reddish purple _____

Leaf Color Pattern: Whole leaf _____ Between veins _____ Veins & petiole _____ Margins _____

Tip _____ Spotted _____ Other pattern (describe) _____

CROP PRODUCTION INFORMATION

Method of Application	Fertilizer Applied to This Crop (lb/A)							
	N	P ₂ O ₅	K ₂ O	S	Mn	Zn	Cu	B
Broadcast								
Row / Band								
Topdress / Foliar								

Other Nutrient Materials (gypsum, sewage sludge, sawdust, etc.) _____

Crop Tillage: Conventional _____ No-till _____ Minimum Tillage _____

Field / Growing Conditions: Normal _____ Wet _____ Dry _____ Hot _____

Greenhouse Media Type: Peat-lite _____ Pine Bark _____ Sandy Loam _____ Silt-Clay Loam _____

COMMENTS — Please provide us with comments related to crop treatment, growing conditions, and insight that may be helpful.
